



1800 820 2020
 contactus@plus.com.sg
 www.plus.com.sg

Please complete and mail to:
 Plus! U, c/o Oversea-Chinese Banking Corporation Limited, Account Services
 Bras Basah Post Office Locked Bag Service No. 8 Singapore 911886

**PLUS!
 PHONE BANKING
 SERVICES FORM**

Customer's Particulars

Name (Mr/Mrs/Mdm/Ms/Dr)	Access Code (if applicable)	NRIC/Passport Number
Email Address	Contact Number	

Phone Banking Services

<input type="checkbox"/> Application (I wish to apply for the Plus! Phone Banking Service)	<input type="checkbox"/> Terminate (Please terminate my Plus! Phone Banking Service as I do not wish to use it any more)
<input type="checkbox"/> Reissue PIN (Please re-issue my Phone Banking PIN as I have forgotten my PIN)	<input type="checkbox"/> Re-activate (Please re-activate my Plus! Phone Banking Services as I have exceeded the maximum PIN tries)

Change of Daily 3rd Party Funds Transfer Limit

Plus! Phone Banking daily limit is defaulted to S\$3,000. Please select your new daily 3rd party Funds Transfer Limit:-

<input type="checkbox"/> Disable 3 rd Funds Transfer Service	<u>For Bank Use</u> (PBP00)	<input type="checkbox"/> S\$5,000	<u>For Bank Use</u> (PBP05)
<input type="checkbox"/> S\$1,000	(PBP01)	<input type="checkbox"/> S\$10,000	(PBP10)
<input type="checkbox"/> S\$3,000	(PBP)		

Pre – Signed Funds Transfer Service

Applicable to Phone Banking and Internet Banking Services (please allow 2/3 working days for the transfers of 3rd party accounts)

I would like to add/delete the following accounts that I can transfer to:

1) Add Delete

Beneficiary Name _____ Account Number _____
 Bank Name/Branch Name _____

My initials to be printed on my beneficiary's statement (only applicable for "Add") : _____ **Max 9 Characters**

I would like this account to be identified as (only applicable for "Add") :

- My Account My Husband's Account My Parent's Account My Child's Account
 My Wife's Account Others. I would like this account to be identified as _____ **Max 5 Characters**

2) Add Delete

Beneficiary Name _____ Account Number _____
 Bank Name/Branch Name _____

My initials to be printed on my beneficiary's statement (only applicable for "Add") : _____ **Max 9 Characters**

I would like this account to be identified as (only applicable for "Add") :

- My Account My Husband's Account My Parent's Account My Child's Account
 My Wife's Account Others. I would like this account to be identified as _____ **Max 5 Characters**

Bill Payment

Applicable to Phone Banking, ATM and Internet Banking Services (please allow 2/3 working days for organisations to receive payment)

Add	Delete	Name of Organisation	Bill Reference Number
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

Agreement

I agree to abide and be bound by the Terms And Conditions Governing Plus! Electronic Banking Services* which I have read and any amendments, alterations and additions thereto as may be from time to time be made. I consent to the disclosures as provided therein and agree that all payments be debited to my account(s) with you.

 Signature & Date (please sign as you would for your Plus! account)

For Bank Use

Remarks	Verified By :	Processed By (Date & Time)

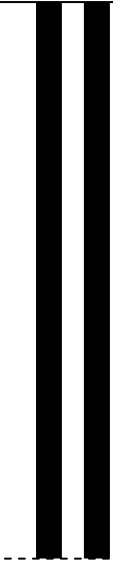
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Singapore 911886



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